

02/22

HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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PSC
HDEA

STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
PERREIRA,	Randy	P.	543-0003
MAILING ADDRESS (Street)			FAX
888 Mililani Street, Suite 601			528-0922
(City)	(State)	(Zip Code)	
Honolulu, HI 96813			
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Hawaii Government Employees Association			536-2351
MAILING ADDRESS (Street)			FAX
same			
(City)	(State)	(Zip Code)	
Honolulu, HI 96813			

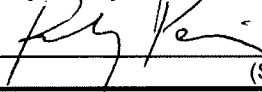
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)	TELEPHONE	
Hawaii Government Employees Association	536-2351	
MAILING ADDRESS (Street)	FAX	
888 Mililani Street, Suite 601	528-0922	
(City)	(State)	(Zip Code)
Honolulu, HI 96813		
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE	
Nora Nomura	543-0071	
MAILING ADDRESS (Street)	FAX	
888 Mililani Street, Suite 601	528-0922	
(City)	(State)	(Zip Code)
Honolulu, HI 96813		

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	_____

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

2-2-07

(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Randy Perreira	Deputy Executive Director

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Hawaii Government Employees Association	543-0003

MAILING ADDRESS (Street)	FAX
888 Mililani Street, Suite 601	528-0922

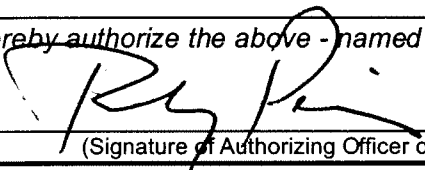
(City)

Honolulu, HI 96813

(State)

(Zip Code)

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

2-2-07

(Date)